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## State of domestic violence content in MSW curriculum in the U.S. Perspectives on Social Work

Abha Rai

*Loyola University Chicago School of Social Work, [arai4@luc.edu](mailto:arai4@luc.edu)*

Yoon Joon Choi

*University of Georgia*

Lalit Khandare

*Pacific University*

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# **State of Domestic Violence Content in MSW Curriculum in the U.S.**

**Abha Rai, MSW**

**Y. Joon Choi, PhD, MSW**

University of Georgia, School of Social Work

**Lalit Khandare, PhD, MSW**

Pacific University

*Correspondence concerning this article should be addressed to Abha Rai, 279 Williams St. Athens, GA 30602-1746; Email: [abha.ra@uga.edu](mailto:abha.ra@uga.edu)*

## **Abstract**

Domestic violence remains a serious concern in the U.S. and stopping family violence is one of the 12 grand challenges for social work. Further, the core values of our profession are deeply rooted in social justice, dignity and worth of the person and importance of human relationships. This makes the preparedness of social work students to address domestic violence crucial. Social work students need to be provided with support to work with survivors, perpetrators and their families, while engaging in prevention of domestic violence. The present study explores the extent to which domestic violence content is covered within MSW curriculum in the U.S. Out of the 266 MSW schools accredited by the CSWE; we received 64 responses with a 19.5% response rate. About 70.4% of the programs surveyed offered at least one dedicated course on domestic violence. While there still remains a great need to expand the domestic violence curriculum in MSW programs, this study demonstrated recent increases of domestic violence content in MSW curriculum and in innovative teaching tools.

*Keywords:* domestic violence, social work curriculum, teaching tools, competency

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## **Introduction**

Domestic violence is a serious concern in the U.S. The National Coalition Against Domestic Violence (2015) defines domestic violence (DV) as willful intimidation, physical assault, battery, sexual assault, and/or other abusive behavior as part of a systematic pattern of power and control perpetrated by one intimate partner against another. The estimates by the Centers for Disease Control and Prevention (CDC)'s National Intimate Partner and Sexual Violence Survey show that between 9.7 - 32.4% of women and 2.3 - 28.3% of men in the U.S. have experienced stalking, sexual and physical violence by an intimate partner in their lifetime (Smith et al. 2017). There are several social, economic, behavioral, mental and physical health concerns that are associated with experiencing DV (Callahen, Tolman & Saunders, 2003; Miller-Perrin, Perrin & Renzetti, 2017). These concerns may impact the quality of life experienced by survivors. Individuals who have experienced DV are more susceptible to re-experiencing violence at a later point in their lives (Hendy et al., 2003; Miller-Perrin et al., 2017).

According to the national survey conducted by the National Center for Injury Prevention and Control, the most common groups to whom abuse is disclosed includes friends, family members, counselors, the police, health care professionals, and crisis hotlines (Breiding, Chen & Black, 2014). This means that social work professionals such as case managers, therapists and counselors, are very likely to make contact with survivors of DV. Social work professionals could also be actively engaged in working with the families of survivors through bystander interventions or with perpetrators through accountability programs. Of note, stopping family violence is one of the 12 grand challenges for social work (Edleson, Lindhorst, & Kanuha, 2015). The 12 grand challenges are a call to action for social work to tackle serious, interrelated, and large-scale challenges, to promote individual and family well-being and a just society. Further, the core values of the social work profession as highlighted by the NASW Code of Ethics elucidate the importance of social justice, dignity and worth of the person and of human relationships (NASW, 2017). This makes it critical for social work students to learn evidence-based DV interventions and be skilled in collaborating with health care and criminal justice professionals to provide services to survivors, their families, as well as perpetrators, while engaging in DV prevention.

### **Existing knowledge about Domestic Violence Curriculum**

In a 2003 investigation, the National Institute of Medicine found very little systematic educational content on family violence in schools of social work in the U.S. There were only three out of 258 BSW and five out of 74 MSW programs that offered DV courses (Cohn, Salmon & Stobo, 2002). Danis and Lockhart (2003) observed no social work professional standards or competencies for addressing DV. They identified only two articles on DV published in the *Journal of Social Work Education* in the 20 years between 1983 and 2003. Until 2002, publications around inclusion of content on DV in social work curriculum were extremely rare (Cohn et. al., 2002; Danis & Lockhart, 2003; Warrener, Postmus, & McMahon, 2013). Social work students often faced difficulty in integrating the vast body of research and literature while trying to understand how to work with survivors of violence (Begun, 2014).

In a study conducted by Tower (2003) with medical social work students (n=188), it was found that 36% of students had no exposure to DV during their MSW education, while 64% received some information during coursework. Furthermore, only a small percentage (25%) of the sample indicated having a standalone course on DV. In a survey by Black, Weisz, and Bennett (2010) conducted with social work MSW students (n=124) to assess their ideas about DV, the authors found that the students lacked knowledge and expertise about intervening tactics that could be helpful for DV survivors.

Studies have shown that DV courses and training are a crucial component in MSW programs. This training has a positive correlation with improved attitudes, clearer beliefs, and effective professional efficacy to work with DV survivors (McMahon, Postmus, Warrener, Plummer, & Schwartz, 2013; Postmus & Merritt, 2010; Postmus, McMahon, Warrener, & Macri, 2011; Wilkin & Hillock, 2014). However, social workers did not feel that they were prepared during their MSW education to address DV (Danis, 2003). Stover and Lent (2018) proposed 180 hours of training with guidelines on DV intervention as a national standard for providers as they found the lack of such training among social workers could be detrimental to the lives of survivors.

Since the study by Danis and Lockhart (2003), there has not been a study that examined DV content in social work curriculum. The extent to which DV courses are being taught in social work

programs and the manner in which social work competencies are incorporated within DV courses are not fully known. In addition, it is not enough for social work students to just be able to read about DV through research studies to be able to effectively work with DV survivors/ perpetrators and their families. Without actually receiving education and training on DV (i.e., definition, types, and cycles of DV, impact of DV on children, legal options for DV survivors and their families, screening of DV, safety planning, crisis intervention, etc.), many students will be unequipped to effectively assist DV survivors/perpetrators and their children.

The purpose of this study are to examine: 1) the perceptions and availability of DV courses in MSW programs and, 2) the academic content on DV, teaching methods, and the extent of its congruence with the Council on Social Work Education-Educational Policy and Accreditation Standards (CSWE-EPAS) competencies. Our study will be instrumental in filling gaps about the limited knowledge pertaining to the extent to which MSW programs incorporate a DV curriculum and; in understanding the manner in which CSWE-EPAS competencies are incorporated into the content being offered by MSW programs. Our study will be the second national study after Danis & Lockhart's study (2003) to explore social work curriculum on DV across accredited MSW programs in the U.S.

## **Method**

### **Research Design and Data Collection**

This study employed a cross-sectional design (Engel & Schutt, 2013) to explore the current state of DV content in social work curriculum in the U.S. An approval to conduct research from the Institutional Review Boards (IRBs) at the authors' Universities was obtained prior to conducting the study. Data was collected online via Qualtrics from January to February in 2017.

The names and contact information of MSW program directors/chairs from 266 CSWE accredited MSW programs in the U.S. were obtained from the CSWE website. The reason for focusing on MSW programs was because MSW is considered a terminal degree for the profession (Anastas & Kuerbis, 2009). This makes it essential for social workers with a MSW to be prepared to address DV before they begin engaging in micro and macro DV practices and intervention delivery.

An email with an online survey link was sent to 266 MSW program directors/chairs in the U.S. Additionally, personalized email requests to complete the survey were sent to some MSW program directors and faculty of schools of social work that were known to the authors. A DV listserv was also used to send the survey to DV researchers who may be knowledgeable about DV courses offered by their social work programs. They were asked to either complete the survey themselves or forward it to the MSW director/chair of their social work programs. The body of the email explained the purpose of the study to the participants and provided them with a link to the survey. The email consisted of the contact information of the primary investigator (PI) and the IRB, in case the participants had any questions or concerns regarding the study. Survey methodologists such as Dillman, Smyth and Christian (2014) recommend two to three reminders to surveys in order to increase the response rate. Therefore, two reminder emails were sent to the participants between January- February 2017.

The first page of the survey consisted of a consent form for the participants, which included the purpose of the study and emphasized upon the voluntary nature of participation. It was made clear

through this consent form that the participants had the option of leaving the survey at any point. To protect confidentiality, no identifying information was collected, and the participants were not asked to sign the consent form.

### **Survey Questions and Data Analysis**

It took approximately 10-12 minutes to complete the survey with average-to-good internet speed. Because DV and intimate partner violence (IPV) are used interchangeably, we included both terms in the survey. The questions included in the survey were: Type of college (public, private or religiously affiliated), size of the program, opinions on the need for DV/IPV courses in MSW program curriculums, the number and type of DV/IPV courses offered, duration for which the courses had been offered, the number of students who enrolled in the courses, and the number of faculty members who were considered as DV/IPV experts.

To understand the academic content on DV/IPV being incorporated in classrooms and the extent of its congruence with the CSWE-EPAS competencies, we provided the participants with an option to email syllabi of the DV/IPV courses offered at their programs. The online Qualtrics file was imported to Statistical Package for the Social Sciences (SPSS) 24 to analyze the data (Berkman & Reise, 2012). A thematic analysis was used to analyze the DV/IPV course syllabi. Research notes were maintained by the researchers throughout the process of data collection and analysis.

## **Results**

The section below describes the findings of the present study. The findings have been divided into subsections discussing program characteristics, participant perspectives on DV/IPV courses, types, titles and levels of MSW courses offered, syllabi analysis and other findings.

### **Program Characteristics**

Out of the 266 schools, we received 64 responses with a 19.5% response rate. Table 1 lists the program characteristics of the study respondents. The respondents representing public, private, religiously affiliated universities were 66% ( $n=37$ ), 21% ( $n=12$ ), and 13% ( $n=7$ ), respectively. Most of the MSW programs had 0-100 students (25.9%) or 101-200 students (27.8%), and 11.7% of the programs had larger than 1,000 students (see Table 1).

### **DV Course Offerings and Participant Perspectives on DV Courses**

*MSW students and their learning of DV/IPV.* When asked about the level of agreement with the following statement, “MSW students should learn about domestic violence or intimate partner violence,” the overwhelming majority of the respondents agreed (18%,  $n=12$ ) or strongly agreed (64%,  $n=41$ ). Interestingly, there were differences in responses depending on the type of university. Among the respondents from public universities, 80.6% ( $n=30$ ) agreed/strongly agreed that MSW students should learn DV/IPV content, while 75% ( $n=9$ ) of the respondents from private universities affirmed agreement (strongly agreed or agreed). It is noteworthy that 100% ( $n=7$ ) of the private religiously affiliated universities strongly agreed that MSW students should learn about DV in their classroom.

*MSW programs and dedicated DV/IPV courses.* When asked if the MSW programs should offer dedicated courses on DV, a significant number of participants agreed or strongly agreed (67%,  $n=43$ ) on the need for having a dedicated course on DV/IPV. The need for having a dedicated DV course also

differed by university type. 63.9% ( $n=25$ ) of public universities, 66.7% ( $n=8$ ) of private universities, and 85.7% ( $n=6$ ) of religiously affiliated universities agreed or strongly agreed on the need of having a dedicated course on DV/IPV.

It was reported that 27.8% ( $n=15$ ) of the MSW programs did not have any dedicated courses on DV/IPV. Furthermore, 59.3% ( $n=32$ ) of the programs had one dedicated course on DV/IPV, 7.4% ( $n=4$ ) had two courses, and 5.5% ( $n=3$ ) had more than two courses (see Table 2).

Of the MSW programs that had dedicated DV courses, 70.3% ( $n=26$ ) said that the course was offered every year as an “elective”, while only one school “required” a DV/IPV course (see Table 2).

*Students enrolled in DV courses.* When asked about how many students take courses on DV/IPV every year, 39% ( $n=25$ ) reported 1-20 students, 50% ( $n=32$ ) reported 21-50 students, 11% ( $n=7$ ) reported 51-200 students. Additionally, 78% of the programs reported the presence of a “DV/IPV expert” among their faculty.

### **Types, Titles and Levels of MSW Courses Offered**

When asked about the type of DV/IPV course offered, 47% ( $n=20$ ) reported that they had an overview course (which broadly provided an overview of DV), 42.9% ( $n=18$ ) programs had a micro level course (which provided an explanation of DV at an individual level and had a clinical focus), and 9.5% ( $n=4$ ) had a macro level course (which explained DV as a larger problem both of the individual and the society and focused on the discussion of systemic-level gaps) (see Figure 1).

Furthermore, respondents were asked about the title of the courses they offered; 40% ( $n=12$ ) of the course titles had the term “IPV,” 23% ( $n=7$ ) of the course titles had the term “family violence,” 17% ( $n=5$ ) of the course titles had the term “domestic violence,” and 10% ( $n=3$ ) of the course titles had the term “community” in addition to IPV/DV/family violence, and 10% ( $n=3$ ) had other terms, such as “women’s studies”, “abusive family systems”, and “marriage and family systems” in addition to “IPV/DV/family violence” (see Figure 2).

### **Thematic Analysis of DV Course Syllabi**

This section presents an overview of eight MSW level syllabi provided by the respondents. The courses ranged from seminar courses, clinical practice courses, or macro practice courses. Only one of the reviewed courses was offered online. All the courses were offered in the second year of the MSW program. Some syllabi specifically mentioned prerequisite course requirements, such as having taken direct practice classes before opting for a course on DV/IPV.

*Course Objectives.* The general objectives of the courses were tied to CSWE-EPAS competencies, course contents, assignments, and other evaluations. Some of the course objectives were: (a) understanding the prevalence, types, impact, dynamics, and complex nature of IPV/DV, (b) learning the impact of diversity and oppression, (c) awareness of ethical responsibilities, dilemmas, and culturally responsive interventions, (d) capacity to conduct safe and effective risk assessments and safety planning, (e) demonstrating knowledge of culturally sensitive interventions and best-practices, and (f) demonstrating knowledge of an array of systems and services. To a large extent, the objectives were similar across courses with slight modifications based on the emphasis of the course. One exception to

these objectives was a clinical practice course describing the broader objective of the course as enhancing student's skills in identifying, assessing and/or intervening either along or on behalf of family members in cases where DV exists.

*Teaching tools.* In addition to in-class teaching-learning, online activities such as forum discussions, reading reviews and out of class activities such as mock intervention case studies with clients, were incorporated to enhance comprehensive learning goals. In seminar and clinical courses, one of the major components in instruction was special guest lectures from researchers and practitioners in the areas of DV/IPV and other forms of violence. The assignments and teaching contents were systematically in-line with EPAS competencies (CSWE, 2015), which will be discussed in a later section.

*DV topics.* The general topics largely covered by most courses were the historical and cultural dimensions of gender oppression and its linkages with DV (such as the impact of DV on children, law, policy, practice and ethics). The syllabi we collected broadly focused on the U.S., although there were some that focused on DV internationally, giving special attention to The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the role of international organizations in the context of DV. One syllabus was systematically designed with a life-span approach to DV beginning from early childhood until old age. Topics such as cyber stalking, teen dating violence, DV issues of military personnel, the economic dimension of DV, and DV against LGBT, (dis)abled, older adults and other vulnerable populations were integrated into half of the syllabi. There was just one syllabus that discussed DV in relation to immigrant and refugee women and their unique needs while experiencing DV.

**Assignments, evaluations & CSWE competencies.** Evaluation of students is an important component in achieving course objectives and fulfilling the EPAS competencies (CSWE, 2015). Across the macro, clinical, and seminar courses, there were safety planning assignments and mock simulations (*competency 1*- demonstrating ethical and professional behavior; *competency 2*- engaging diversity and difference in practice). In a seminar-based course, the student's evaluation included assignments on topics around practice-based learning and IPV interventions, integration of theories, practical solutions along with assignments on safety and IPV advocacy (*competency 4*-engaging in practice-informed research and research-informed practice; *competency 9*- evaluate practice with individuals, families, groups, organizations and communities).

Clinical courses incorporated reflective assignments to understand students' knowledge about DV from the perspective of family members and social workers (*competency 3*-advancing human rights and social, economic and environmental justice; *competency 6*- engaging with individuals, families, groups, organizations and communities; *competency 7*-assessing individuals, families, groups and organizations and communities; *competency 8*-intervening with individuals, families, groups, organizations and communities). Some courses placed more emphasis on the engagement of students with reflective papers and others on the theory and history of oppression and feminism (*competencies 3 & 4*.) These assessments were expected to assess the students' ability to synthesize course learnings and the extent of their reflexivity. One course emphasized macro policy-based learning by observing court proceedings on DV. The students were then expected to record their observations on paper (*competency 5*-engage in policy practice).

It is important to note that some of the courses had a major emphasis on values and ethics while reflecting on DV. Some syllabi listed details of practice behaviors under each of the learning competencies. The use of competency-based evaluation assignment strategies included in the syllabi allowed students to demonstrate knowledge, skills, values, cognitive, and affective processes.

### **Discussion**

Integrating DV in social work curriculum was one of the key recommendations in a summit on violence against women organized by Office on Women's Health (OWH) of the U.S. Department of Health and Human Services (NASW, 2002). In addition, the emphasis on strengthening the curriculum on DV has been expressed in various forums and through initiatives by national social work organizations like CSWE, National Association of Social Workers (NASW), and Society for Social Work and Research (SSWR). Despite such a strong push toward integrating DV courses within the social work curriculum there have been gaps; which our study endeavored to fill. The purpose of our study was to explore gaps in research pertaining to the extent to which a cohesive DV curriculum has been employed in MSW programs in the U.S. We were also interested in exploring the utility of the CSWE-EPAS competencies across the syllabi employed by schools teaching a DV course.

In recent times, the American Academy of Social Work & Social Welfare has classified, Stopping Family Violence as one of the 12 Grand Challenges of social work. They promote violence-free relationships, communities, and encourage a safer space for children (Edleson et. al.,2015). Social workers are bound to promote social justice, dignity and worth of the person and safeguard human relationships (NASW, 2017) making it vital for them to be adequately trained and skilled in working with DV survivors and their families. It is imperative that social work students are trained in addressing DV situations, providing the necessary support to families and contributing toward ending family violence. More so, it is essential that schools of social work integrate these core values of the social work profession into the syllabi used to train students in working with DV survivors and their families.

The present study shows that in the past 15 years since Cohn et al.'s (2002) and Danis and Lockhart's (2003) study, social work education has made some progress in educating social work students on DV by offering more dedicated DV courses to MSW students. We saw that out of our respondents, at least 32 schools had one dedicated DV program. Among our sample, 15 programs added dedicated courses on DV in the past five years. Moreover, a large proportion of the participants in our study agreed with the need to enhance MSW course content with DV specific courses. Even the social work programs that did not offer DV courses, expressed the need to introduce DV courses in their curriculum.

In this vein, it is essential for social work program administrators to constructively support these curriculum modifications. Creative learning strategies used in classrooms not only involved basic knowledge-level learning, but also yielded the attainment of higher-order thinking through learning by doing (Danis, 2016; Vermunt, 1996). Such creative methods of content delivery help in the teaching of a sensitive and complex topic such as DV/IPV. Additionally, field placement and practicum courses across MSW programs can be helpful in providing hands- on learning experiences to students in working with individuals experiencing DV. MSW programs are encouraged to focus on placing their students in DV agencies to offer students an opportunity to directly interact with families facing DV. In-class discussion about the experience of these students would also be beneficial to others who are not in a similar placement.



There has also been increased infrastructural progress on constructing specialized DV courses, although there is more thrust on such DV-focused courses at public and private universities in comparison to private religiously affiliated universities as noted in our study. Religion is often a reason DV survivors stay in abusive relationships, and sometimes abusers use scripture to reinforce their power and to control survivors. Spiritual abuse is a commonly occurring power and control tactic among immigrant families (Bent-Goodley, St. Vil, & Hubbert, 2012; Choi & Cramer, 2016). MSW students at religiously affiliated social work programs may have more opportunities to interact with religious survivors of abuse through placements. Therefore, it is even more important for them to learn about DV and be aware of how religion can be a roadblock, as well as a resource, for survivors and their families.

### *Recommendations for Social Work Education*

It is evident that there has been progress in the field of social work education when it comes to training students on issues around DV. However, there are a few areas for improvement on DV courses. First, the course content should incorporate discussion on the issues of culture, diversity, oppression, and social justice vis-à-vis DV, so that social work students can develop a working knowledge and sensitivity to issues specific to DV and diversity (culture, race, ethnicity, gender, economic level, developmental state, disability, immigration status, and sexual orientation). While we do not know the extent to which discussion of culture and diversity are included in all the DV courses offered in the sample, there were only a few syllabi that we reviewed that depicted the emphasis on the intersections of class, race and gender while addressing DV.

Crenshaw (1991), in her research on battered women, stated that the victims of DV in Los Angeles were mostly poor women and women of color, and disproportionately likely to be unemployed. She observes that the race, gender, and class convergences, and generic interventions will have limited scope in these cases. Similarly, women from immigrant communities face unique and additional challenges in accessing legal and social services (Cramer, Choi & Ross, 2017; Danis & Lockhart, 2003) as they have unique needs (Rai & Choi, 2018). However, only one syllabus we reviewed included content on immigrant survivors of DV. The focus on diversity is integral within a social work DV curriculum, as incorporating diversity and difference in practice is one of the competencies of the CSWE-EPAS (2015).

Second, the findings point toward the need to employ innovative ways to offer DV content to more MSW students (i.e., online or hybrid courses). While we do not know the portion of DV courses being offered online among our sample, only one syllabus we reviewed indicated that it was offered online. Offering DV courses online will certainly increase the accessibility of courses for MSW students; however, it is important to consider the utility of teaching asynchronous online courses on DV. Danis (2016) recommends that while teaching an online DV course, there should be an opportunity for students to pursue their assignments with clients, more opportunities for group activities, periodic review/feedback of content delivery, and sharing of innovative resources across social work programs so as to enable a more holistic learning. Innovative classroom and virtual environments, incorporating aspects such as technological tools, flipped classroom learning, digital classroom learning, are more effective in content delivery (Danis, 2016; McKeachie, & Svinicki 2010). We believe that further introduction of innovative teaching strategies, including hybrid courses, more engaging online content, flipped classroom learning and guest lectures by experts can help close this gap in online teaching of DV. Field placement liaisons

and coordinators are encouraged to work with DV agencies so that students have an opportunity to directly learn by interacting with families facing violence.

Finally, in addition to educating and training MSW students on clinical interventions with DV survivors, DV courses should also encourage students to engage in DV policy practice. The Violence Against Women Act (VAWA) and Trafficking Victims Prevention Act (TVPA) provide important protections for survivors, including immigrant survivors of DV, sexual assault, and human trafficking. Therefore, it is essential for social work students to be educated on policies like VAWA and TVPA that protect survivors of DV. Furthermore, DV courses should provide an opportunity for social work students to engage in policy practice, analyzing policies' impact on survivors of DV, and calling on elected officials and law enforcement officials to help create an environment that does not leave certain survivors of DV in danger (i.e., immigrant survivors).

### *Limitations*

This study provides an important contribution toward building literature around the current state of DV content in MSW curriculum. In addition, the recommendations on understanding the need to create such content and the areas in which the content needs to focus on, are noteworthy. Despite this, there are a few limitations to the study. The first is the 19.5% response rate, which may impact the generalizability of the results. With the response rate of 19.5%, this study has a higher response rate than a similar study conducted in 2003. However, it still does not capture 80% of CSWE accredited MSW programs in the U. S., which may or may not offer dedicated DV courses. Lastly, while the attempt of the research study was to posit a comprehensive state of DV content in social work curriculum, the researchers were only able to access eight full length syllabi, which limits the in-depth understanding of DV courses offered to MSW students. Therefore, a more comprehensive study that also examines the websites of MSW programs and obtains and reviews syllabi of DV courses would be necessary to obtain a full picture of the status of DV content in social work education.

## **Conclusion**

We believe that our study has been helpful in filling the gap in research of social work education by examining the extent to which DV curriculum is being integrated in MSW programs. Our study is the most up to date after the study conducted by Danis & Lockhart (2003). Despite the seemingly small ( $n=32$ ) number of MSW programs with at least one DV course, we have seen an overall consensus about the importance of a DV course across MSW programs that were surveyed. The syllabi that we received were aligned to the CSWE-EPAS competencies making it clear that schools are focused on integrating core competencies among future social work personnel working in the area of family violence. These competencies are closely aligned to the core values of the social work profession as enlisted in the NASW Code of Ethics (NASW, 2017).

With significant progress made on educating social work students on DV, surveying MSW students and social work practitioners regarding their knowledge and competencies to address DV would help evaluate the true impact of increased content on DV in the social work curriculum. It is imperative that the next generation of social workers are well equipped to provide DV intervention and prevention services, which will ultimately contribute to the grand challenge of stopping family violence and staying

authentic to the core mission of the profession. The role of social workers is crucial in addressing family violence and ensuring the safety of children. We urge national level organizations such as CSWE, SSWR, and the NASW to develop social work professional standards or social work competencies for addressing DV. Finally, social work educators, researchers, students are all urged to collaborate on developing expertise on best practice models suitable for preventing and addressing DV.

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**Abha Rai** is a doctoral candidate (ABD) at the University of Georgia. She has over a decade of experience working with marginalized communities both in India and the United States. As a certified counselor, Rai worked with women facing gender-based violence and designed empowerment programs for them. Her area of research interest pertains to gender-based violence issues in diverse populations, especially immigrant communities. Her dissertation focused on collecting national data to understand the perceptions of domestic violence and examine its correlates among South Asian immigrants in the United States. Rai has several publications and conference presentations to her credit. She was recently awarded the APISWEA doctoral fellowship. Owing to her scholarly work and academic excellence at UGA, she was featured as a “UGA Amazing Student,” in the UGA graduate magazine and also awarded the Graduate Education Advancement Board Fellowship. She has received a grant through the “*Giving Voice to the Voiceless Fund*”, using which she aspires to design awareness interventions in the area of gender-based violence with the goal of addressing the Grand Challenge of *Ending Gender-based Violence*.

**Y. Joon Choi** has worked in the field of domestic violence for more than 20 years, first as a counselor/advocate for Asian immigrant women in New York City and later as a founding member of New Visions, where she oversaw the design, implementation, and evaluation of a CDC-funded prevention-focused Coordinated Community Response (CCR) to domestic violence in Asian communities in Michigan. Her current research focuses on developing and evaluating an online domestic violence training curriculum for Korean American clergy. Her research interests include violence against women, substance abuse, HIV/STDs among minority and immigrant women.

**Lalit Khandare** is an assistant professor at MSW program at Pacific University Oregon. Lalit has received a Ph.D. in Social Work (Minor in Public Affair & Philanthropic Studies) from Indiana University. He has M.A. in Social Work (TISS, Mumbai) and MPhil in Planning & Development (IIT Bombay). He teaches courses in research methods, program evaluation, global health, and beyond the cycle of violence. He also serves on the board of Council on Global Social Issues (A committee of CSWE). Also, he is a member partner at National Homelessness Social Work Initiative. He is engaged in research and evaluation in the area of public housing & urban redevelopment, public health, domestic violence, and social inclusion. He has taught course in social work programs at Pacific University and Indiana University in the area of statistics, research methods, social policy, program evaluation, global health, and field practicum. He was engaged in various research and evaluation projects, like program needs assessment (Indianapolis Housing Agency), Oklahoma Statewide Virtual Charter Board Evaluation (Intern at TPMA), and Sustainable Livelihoods (funded by Karuna Trust and OXFAM). He has presented his work in various universities and conferences at USA, India, Peru, Germany, and UK. His research has received particular attention at global symposiums and conferences at U.K. Parliament, World Bank, Berlin Urban Roundtable, and Oxford University Poverty & Human Development Initiative.

